

# REPORT OF EXAMINATION & POSTING ROUTER

☐ ROE ☐ ROE for Change

☐ TW Donation ☐ TW Extension

WR Doc ID: \_\_\_\_\_

PROTESTS? ☐ Yes ☐ No

File No.: CS4-01745 Asb 76

Author/Date: Debra Krohn

QA/QC Review Group: \_\_\_\_\_

(Date)

SharePoint> WRDAS\Trustdonations\  
taylor 01745 sb 76

Y:\Staff\ \_\_\_\_\_

Unit Supervisor: \_\_\_\_\_

(Initial & date - Begin routing.)

Dates drafted/edited (Admin): \_\_\_\_\_

Reviewer/Date \_\_\_\_\_

(Reviewer please comment on back of page)

GWIS Mapping Review (review changes BEFORE final)

GWIS initials/date: \_\_\_\_\_

GWIS remarks & edits (if more room is needed use back of page):

Permit Writer: \_\_\_\_\_

(Initial & date - ROE DRAFT ready for 30-day posting to Web.)

Unit Supervisor: JP 5/17/13

(Initial & date - ROE DRAFT ready for 30-day posting to Web.)

Section Manager: MC 5/21/13

(Initial & date: ROE DRAFT is ready for 30-day posting to Web)

DRAFT ROE post 30-days to Web initial & date (Admin): \_\_\_\_\_

Permit Writer \_\_\_\_\_

(Initial & date - FINAL ROE ready for mail/posting.)

Unit Sup (Consider Comments): \_\_\_\_\_

(Initial & date - FINAL ROE ready for mail/posting.)

Section Manager: \_\_\_\_\_

(Initial & date: FINAL ROE is ready for mail/posting.)

Y:\Adm\Routers\ROE Review & Posting Router (12/20/2010)

Circle appropriate WRIA. County:

TRIBE	WRIA
Colville Confederated Tribes	49 50 51 52 53 58 60 61
Yakama Nation	29 30 31 32 33 37 38 39 40
Both Tribes	45 46 47 48

Certified CCs: (Check application signatures)

CCs to anyone else? Please list cc's & protestants - more room on back

Philip Bigdon YN  
Jeff Slothower Attorney

Minimum Flow River List? (Y:\Adm\Rivers)

Name of River \_\_\_\_\_

Add name to the appropriate River Data Source: ☐

Attachments:

- ☐ Your Right to Be Heard
- ☒ PTO appeal? No Your Right to Be Heard
- ☐ BC, CC, PA forms \_\_\_\_\_
- ☐ Water Measurement Requirements
- ☐ Fish Screening Criteria
- ☐ Focus on Water Right Relinquishment (98-1812-WR)
- ☐ Other: \_\_\_\_\_

FINAL ROE mail out & post 60-days to Web [Admin]: \_\_\_\_\_

Remarks or Related Files (More space on back of page):

Yakima Basin - No Post



7010 0290 0000 7131 2818

U.S. Postal Service <small>TM</small>	
<b>CERTIFIED MAIL <small>TM</small> RECEIPT</b>	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
<b>OFFICIAL USE</b>	
Postage \$	<i>mailed</i> Postmark Here <i>5/21/13</i>
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To <i>Taylor Ranches</i>	
Street, Apt. No., or PO Box No.	
City, State, ZIP+4	
<i>CS4-01745Asb7a &amp; b</i>	
PS Form 3800, August 2006 See Reverse for Instructions	

ORIGINAL in  
CS4-01745Asb7a

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		A. Signature <i>Pat Taylor</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee B. Received by (Printed Name) <i>Pat Taylor</i> C. Date of Delivery <i>5/22/13</i> D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:	
1. Article Addressed to:  <div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>TAYLOR RANCHES, LLC</b>  <b>3012 HIGHWAY 97</b>  <b>ELLENSBURG, WA 98926</b>          WR/ss TWD CS4-01745Asb7a &amp; b 5/21/13       </div>		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		7010 0290 0000 7131 2818	